

U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

<input type="checkbox"/>	Postage	\$	C-1-01-794
<input type="checkbox"/>	Certified Fee		DOC. 64
<input type="checkbox"/>	Return Receipt Fee (Endorsement Required)		
<input type="checkbox"/>	Restricted Delivery Fee (Endorsement Required)		
<input checked="" type="checkbox"/>	Total Postage & Fees	\$	Postmark Here

Sent To: Richard J Klein # 350-022  
Street, Apt. No.;  
or PO Box No.  
P.O. Box 7010  
City, State, ZIP+4  
Chicago, IL 60601  
PS Form 3800, April 2002

See Reverse for Instructions